Integrated System News Bulletin

Evidence Based Practice Data for EDI Claims

Attention: LOCAL PLAN EDI PROVIDERS ONLY

STOP – Impact on You

Effective September 16, 2010, the Evidence Based Practice (EBP) data becomes mandatory and is required in all claims submitted via Electronic Data Interchange (EDI) regardless of the date of service.

CAUTION – What You Need to Know

The Integrated System (IS) will begin validating all EDI claims to ensure the EBP data is provided. The IS will only allow up to three EBP codes in a claim. New edits will check for the following conditions:

- Missing EBP Loop and Segment
- Invalid EBP code
- Duplicate EBP code
- Exceeds 3 EBP code limit

EDI claims that may contain any one of the above conditions will be denied with Rule 96 for 837 Professional and Rule 64 for 837 Institutional claims **(Validate Evidence Based Practice Code)**. A negative 835 will be returned.

Additionally, the Service Strategy (SS) and Prevention Early Intervention (PEI) values are known as EBP data and have been integrated into the EBP drop down menu.

GO – What You Need to Do

For information of the correct loop and segment structure to supply EBP data in claims, please refer to our 837P and 837I Companion Guides available to download at:
http://dmh.lacounty.gov/hipaa/EDI_Guides.htm

The EDI Deny Reason Cheat Sheet has been updated to reflect new rules for EBP. To download, please click on the link provided below:
http://dmh.lacounty.gov/hipaa/documents/DenyRuleCheatSheet.pdf

For a list of all available and valid EBP, SS, and PEI codes and descriptions, please click on the link provided below:
http://dmh.lacounty.gov/hipaa/documents/EBP-SS_PEI_CODES_v5_000.pdf

If you have any questions regarding EBP edits and rules, please contact the Help Desk at (213) 351-1335.